

AJZ



NOTICE OF APPEAL FROM THE EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Applicant: Behnaz Parhami-Seren, Michael N. Margolies and Garner T. Hauptert, Jr.

Serial No.: 09/412,268 Group: 1642

Filed: October 5, 1999 Examiner: Ungar, Susan NMN

Confirmation No.: 9455

For: Ouabain-Specific Monoclonal Antibodies

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
November 27, 2006	<i>LSA Bevere</i>
Date	Signature
Lisa A. Bevere	
Typed or printed name of person signing certificate	

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01 FC:2401
02 FC:2253

250.00 OP
510.00 OP

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated May 26, 2006 of the Examiner finally rejecting claims 1-6 and 38-60. The item(s) checked below are appropriate:

1. ☒ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated May 26, 2006 for three months from August 26, 2006 to November 26, 2006.
2. ☐ A month extension of time to respond to the Office Action Made Final dated was filed on with payment of a \$ fee.
☐ Applicant hereby petitions for an additional month extension of time to respond to the Office Action Made Final.

3. Fees are submitted for the following:

<input checked="" type="checkbox"/>	Extension of Time for three months		\$ 510
<input type="checkbox"/>	Additional Extension of Time:		
	Fee for Extension	(<input type="checkbox"/> mo.)	\$ _____
	Less fee paid	(<input type="checkbox"/> mo.)	- \$ _____
	Balance of fee due		\$ 0
<input checked="" type="checkbox"/>	Notice of Appeal		\$ 250
<input type="checkbox"/>	Other _____		\$ _____
		TOTAL	\$ 760

4. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$760.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By Anne J. Collins
Anne J. Collins
Registration No.: 40,564
Telephone: (978) 341-0036
Facsimile: (978) 341-0136

Concord, MA 01742-9133

Date: November 27, 2006